

Case study: Specification of CD4+ T cell epitopes of human FVIII

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Mastering Immunogenicity, Boston MA, September 12-13 2011

Hemophilia A



X-linked recessive bleeding disorder that affects 1 in 5,000-10,000 men

caused by mutations in the gene that codes for human clotting factor VIII

gene mutations lead to either diminished function of factor VIII or lack of endogenous production of factor VIII

Clinic: spontanous bleedings and hemorrhages



Major complication of replacement therapy in hemophilia A



Scharrer I et al. Haemophilia. 1999;5:145-154.

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protein dendritic cell BCR: B cell receptor MHCclassII TCR: T cell receptor TCR protein co-stimulation peptides BCR co-stimulation CD4⁺ T cell MHC-TCR peptides classII activated CD4⁺T cell activated B cell Antibodies plasma cell

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Flexibility and plasticity of peripheral CD4⁺ T cells



O Shea et al. Science. 2010; 327(5969):1098-1102.

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Foxp3+ CD4⁺ T cells favour induction of immune tolerance



O Shea et al. Science. 2010; 327(5969):1098-1102.

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Specification of CD4⁺ T cell epitopes of human factor VIII

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B cells and **T** cells recognize proteins in different ways



Peptides presented by MHC-class II



MHC-class II molecule

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Our Approaches:

1. Humanized hemophilic mice

2. In vitro binding assays using the Pro Immune – REVEAL[™] MHC peptide binding assay

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Partially humanized hemophilic mice for identification of major factor VIII T-cell epitopes



E17 hemophilia A mouse (kockout of the murine *factor VIII* gene $-\triangle$) that carries human HLA-DRB1*1501 () and does not express any murine MHC-class II ()

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Induction of antibody response against proteins depends on the presentation of immunogenic peptides by the human HLA-DRB1*1501

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E17 hemophilia A mouse (kockout of the murine *factor VIII* gene $-\triangle$) that carries human HLA-DRB1*1501 () and does not express any murine MHC-class II ()

Induction of antibody response against proteins depends on the presentation of immunogenic peptides by the human HLA-DRB1*1501

The MHC-class II haplotype HLA-DRB1*1501 is associated with an increased risk for patients to develop neutralizing antibodies against factor VIII (Oldenburg et al. 1997; Pavlova et al. 2009)





What are the <u>major factor VIII T-cell epitopes</u> (factor VIII peptides presented by MHC-classII) that drive immune response after i.v. and after s.c. factor VIII ?





peptide library (15 mers with 3 AA offset)

780 different peptides consisting of 15 amino acids each were tested in pools

















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The assay determines the ability of each candidate peptide to bind to a MHC-class II protein of choice compared to a positive and an intermediate control peptide



The assay is measuring the ability of each peptide to stabilize the MHC-peptide complex.

Detection is based on the presence or absence of the native conformation of this MHC-peptide complex.

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Binding of factor VIII peptides to multiple MHC-class II haplotypes

DRA*0101 DRB1*1501



US	Europe	World
10.6%	11.5%	6.2%
11.8%	11.6%	8.3%
10.2%	15.3%	6.5%
5.6%	6.1%	4.1%
7.0%	7.5%	3.1%
5.7%	6.3%	3.1%
6.6%	6.4%	1.7%

Most of the factor VIII peptides identified bind to multiple MHC-class II haplotypes



Most of the factor VIII peptides identified bind to multiple MHC-class II haplotypes



Antibody responses against factor VIII in humanized hemophilic HLA-DRB1*1501 mice depend on the application route. The incidence of antibodies is higher after s.c. than after i.v. application.

A limited set of factor VIII peptides (CD4⁺ T-cell epitopes) drive anti-factor VIII immune responses in humanized hemophilic HLA-DRB1*1501 mice. Immunodominant factor VIII peptides are the same after i.v. and s.c. application of factor VIII.

Factor VIII-specific CD4⁺ T cell epitopes identified in humanized hemophilic HLA-DRB1*1501 mice bind to a number of different HLA-DRB1* haplotypes when tested with ProImmune`s REVEAL class II technology. These results indicate that most of the factor VIII epitopes identified are promiscuous epitopes.

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Center for Innovation and Technology City of Vienna, Austria



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Thank you for your attention

8 i.v. doses of FVIII (1000ng), given in weekly intervals



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